

Multiscale Simulation Framework for Personalized Pharmacology

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2019 ML-MSM Meeting, October 24-25 2019, Bethesda, MD

Multiscale Framework

Compartmental PBPK

Motivation

- > Current models for PK and PD use simplistic mechanistic modeling approaches.
- > Traditional PBPK approach lacks physiological input, with the exception of cardiac output, organ volumes & blood flow rates and neglects transport barriers.
- > PD modeling approaches rely on even more simplistic dose-response correlations
- > A multiscale framework is needed to integrate PBPK models, spatially resolved barrier models, and ML/AI supported mechanistic modeling approaches.

Approach

- > Combine fundamental mechanistic models with AI/ML models to determine model components that are otherwise difficult to obtain through mathematical description.
- > We have established this approach on different applications including
 - a) Opioid and countermeasure test-case for determining PD physiology and effects,
 - b) Orally inhaled drugs (OIDP), and

Blood flow

c) Gastrointestinal tract (GIT) oral drugs.

Inputs/Machine Learning Data



Therapeutics

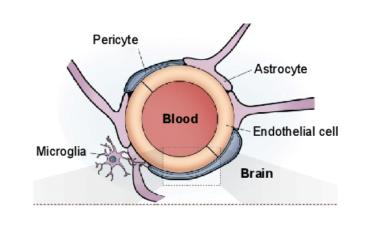
- Drug physicochemical prop.
 - Mol. Wt., LogP
 - Solubility, Partition Coeff...
- Drug formulation prop.
 - Carrier prop., PSD
 - Dry powder, solution, aerosol
- Quantitative ttr-activity (QSAR)
- Biomarkers/Metabolites

Lymphatic flow Mucus **Ab delivery routes** Nasal Tissue Inh. **Mucosal transport Interstitial translocation** Interstitium **GIT** transport/excretion Alveolar Regional LN (NALT) Central LN Oral Regional LN (GALT) Spleen Kidney Tissues (F, B, H, S, M, T) Other

Population & Genetics

- - Disease resistance
- Population variance
 - Anthropometric measures

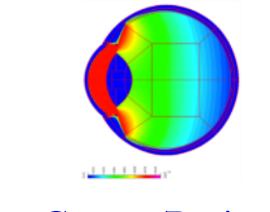
Spatially Resolved Models

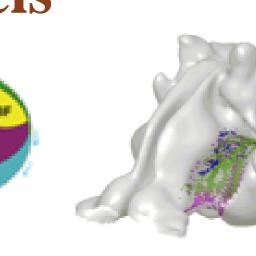


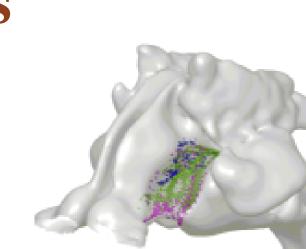
Blood Brain Barrier

Pulmonary

mucosal barrier





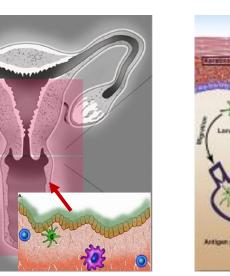


Olfactory

Cornea/Retina Lymph node

Reproductive track

mucosal barrier



Skin topical SC, IM, µNeedle

- Genetic predisposition
 - Gene mutations

Wearable Sensors

- Physical signals (Biomechanics)
 - Pressure, motion,...
- Thermal signals
 - Fever, hypothermia,...
- Electrophysiological signals
 - **ECG**, EEG,...
- Biomarkers/Metabolites

Selected References

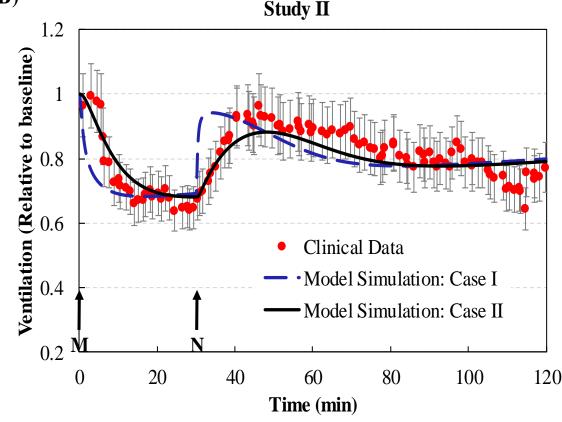
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GIT muscosal

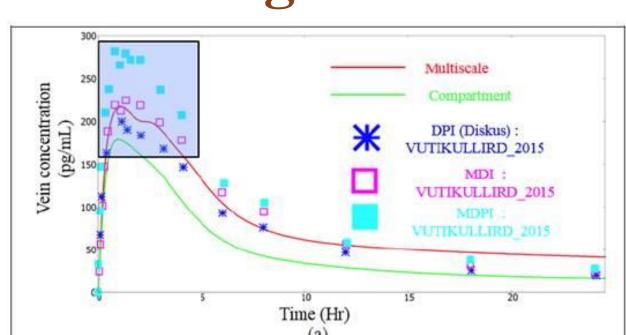
Comput Biol Med. (PMID: 29175100) Kannan et al (2018) A Quasi-3D compartmental multi-scale approach to detect and quantify diseased regional lung constriction using spirometry data. Int J Numer Method Biomed Eng. (PMID: 29486525)

Output

Opioid simulations (Morphine and Naloxone)

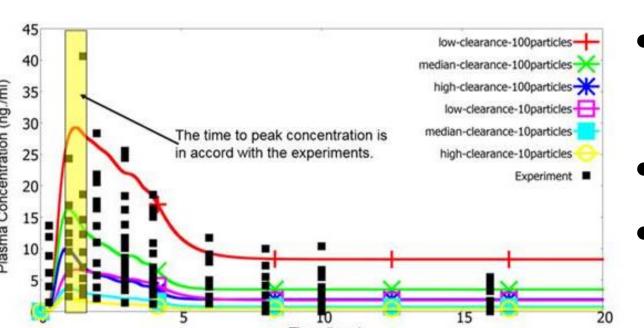


Lung/Inhalation drug simulations (FP)



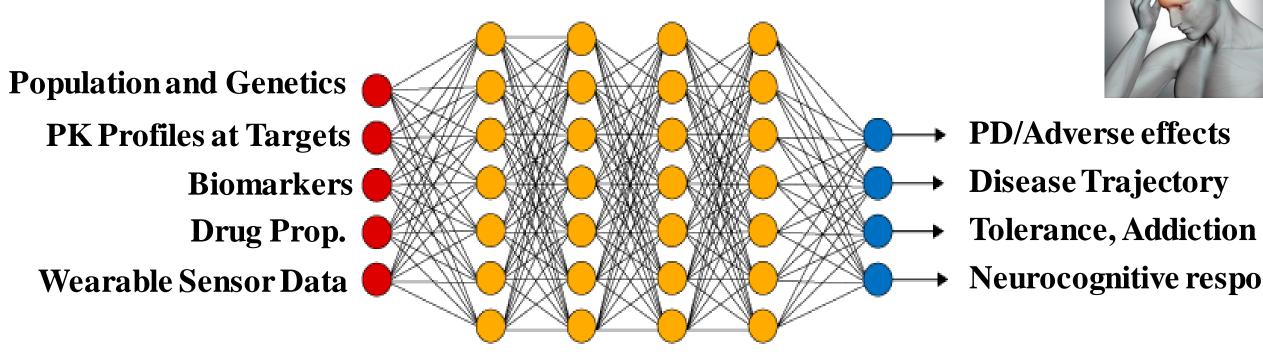
- ODIP Fluticasone (FP) • Multiscale: 0D-3D-Q3D
- Can match the dip and bounce shown in exp's

GIT oral drug simulations (Mebendazole)



- Mebendazole in chewable tablet form
- Multiscale 0D-Q3D model
- Inter-subject variation accounted in model

ML/AI Tools



→ Neurocognitive response

Acknowledgements

- FDA (HHSF223201810182C): Bioequivalence of orally inhaled drugs
- FDA (HHSF223201810151C): MSMP modeling framework for of generic ophthalmic drugs products
- NIH (R43GM133232): MS computational tool to simulate PK of oral drugs in the human GIT
- NIH (1R43GM108380-01) Mechanism-based computational tool to optimize pulmonary drug delivery